FCC For	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. July 2013	3060-0986/OM8 Control No. 3060-0819
<010>	Study Area Code	589008		
<015>	Study Area Name	Telrite Corporat	ion	
<020>	Program Year	2016		
<030>	Contact Name: Person USAC should contact with questions about this data	Mark Lammert		
<035>	Contact Telephone Number: Number of the person identified in data line <030>	4072601011 ext.		
<039>	Contact Email Address: Email of the person identified in data line <030>	regulatory@csilc	ongwood.com	
				54.313 54.422 Completion Completion
ANNUA	AL REPORTING FOR ALL CARRIERS			Required Required (check box when complete)
<100>	Service Quality Improvement Reporting		(complete attached worksheet)	11111
<200>	Outage Reporting (voice)		(complete attached worksheet)	✓
<210>	✓ < check box if no	outages to report		111111
<300>	Unfulfilled Service Requests (voice)			
<310×	Detail on Attempts (voice)			THIN
1310 2	betail of Attempts (voice)		(attach descrip	ive document)
<320>	Unfulfilled Service Requests (broadband)			
				K33333
<330>	Detail on Attempts (broadband)		(attach descri	otive document)
<400>	Number of Complaints per 1,000 customers (voice)			
<410>	Fixed 0.0			
<420>	Mobile 0.0			
<430> <440>	Number of Complaints per 1,000 customers (broad)	oand)		
<450>	Mobile			
<500>	Service Quality Standards & Consumer Protection R Telrite FCC Form 481_Section 500_Service Qua	(50)	(check to indicate certification)	1
<510>			(attached descriptive document)	
50000				
<600>	Functionality in Emergency Situations Telrite_FCC Form 481_Section 600_Emergency F	unctionality.pdf	(check to indicate certification)	
			(attached descriptive document)	1
<610>			juttoched descriptive document)	
	Company Dries Officeings Ivales			111111
	Company Price Offerings (voice) Company Price Offerings (broadband)		(complete attached worksheet) (complete attached worksheet)	111111
	Operating Companies and Affiliates		(complete attached worksheet)	
	Tribal Land Offerings (Y/N)?		(if yes, complete attached worksheet)	
<1000>	Voice Services Rate Comparability Certification			41111
<1010>	•		(attach descriptive document)	MINI
<1100>	Certify whether terrestrial backhaul options exist ((es or No)	(If not, check to indicate certification)	
<1110>			(complete attached worksheet)	
<1200>	Terms and Condition for Lifeline Customers	Dagum	(complete attached worksheet)	VIIIII V
	Price Cap Carriers, Proceed to Price Cap Additional Including Rate-of-Return Carriers affiliated with Pr	200		
<2000>		to cop total Excilu	(check to indicate certification)	THE STATE OF THE S
<2005>			(complete attached worksheet)	111111
<3000>	Rate of Return Carriers, Proceed to ROR Additional	Documentation W	orksheet (check to indicate certification)	anne.
<3000>			(complete attached worksheet)	

	rvice Quality Improvement Reporting Ilection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	589008	
<015>	Study Area Name	Telrite Corporation	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory#cmilongwood.com	
<110×	Has your company received its ETC certification from the FCC?	(yes/no) O	
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes/no) O O	
<112>	report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your c CETC which only receives frozen support, your progress report is only required to address voice telephony service.	rompany is a	
	Please select the appropriate responses below (Yes, No, Not Applicable) to confit that the attached document(s), on line 112, contains a progress report on its five service quality improvement plan pursuant to \$54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	-year	Name of Attached Document
<113>	Maps detailing progress towards meeting plan targets		
<114>	Report how much universal service (USF) support was received		
<115>	How much (USF) was used to improve service quality, and how support was used to impro-	ve service quality	
<116>	How much (USF) was used to improve service coverage and how support was used to improve	rove service coverage	
<117>	How much (USF) was used to improve service capacity and how support was used to improve		

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	549008
<015>	Study Area Name	Telrite Corporation
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory#c#1longwood.com

0.0	Cax	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	ces	<f></f>	<g><</g>	<h>></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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E3011200	ce Offerings including Voice Rate Data ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	589008	
<015>	Study Area Name	Teirite Corporation	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com	
<701> <702>	Residential Local Service Charge Effective Date 1/1/2015 Single State-wide Residential Local Service Charge		

	<81>	<82>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<bs></bs>	40
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
_	-								
	-								
-	-								
_									
_	-								
					7 77				

(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	589008
<015>	Study Area Name	Teirite Corporation
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammers
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com

	cal>	<a2></a2>	 	(b2)	«O	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
_									
								31	
	11-2-1								
-	15 17 17								
-	_								
\vdash									

	erating Companies ection Form					FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-081 July 2013
<010>	Study Area Code		SERONE			
<015>	Study Area Name		Telrite Corpo	ration		
<020>	Program Year		2016			
<030>	Contact Name - Person USAC s	hould contact regarding this data	Mark Lammert			
<035×	Contact Telephone Number - N	umber of person identified in data line <030>	4073601011 ex	it.		
<039>	Contact Email Address - Email	Address of person identified in data line <030>	regulatorywc	silongwood.com		
<810>	Reporting Carrier Tell	rite Corporation d/b/s Life Wireless				
<811>	Holding Company Not	Applicable				
<812>	Operating Company Lit	e Wireless Holdings, LLC				
2002					L	
<813>		<al> Affiliates</al>		SAC		ca3> Business As Company or Brand Designation

275-5=363-730 CSAN	bal Lands Reporting ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	589008	
<015>	Study Area Name	Telrite Corporation	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lanmert	
<035>	Contact Telephone Number - Number of person identified in data line <030		
<039>	Contact Email Address - Email Address of person identified in data line <030	0> regulatory#csilongwood.com	
<910>	Tribal Land(s) on which ETC Serves		
<920>	Tribal Government Engagement Obligation	Name of At	tached Document
		Name of At	tached Document
If your o	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes	Name of At	tached Document
If your o	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached document(s), on line 920.	Name of At	tached Document
If your o	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes	Select Yes or No or	tached Document
if your o	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached document(s), on line 920, trates coordination with the Tribal government pursuant to	Select	tached Document
If your of to confi demons § 54.31	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached document(s), on line 920, trates coordination with the Tribal government pursuant to 8(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal	Select Yes or No or	tached Document
if your of to confi demons § 54.31:	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached document(s), on line 920, trates coordination with the Tribal government pursuant to 8(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	Select Yes or No or	tached Document
If your of to confi demons § 54.31: <921>	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached document(s), on line 920, trates coordination with the Tribal government pursuant to 8(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning;	Select Yes or No or	tached Document
If your of to confidemons § 54.31: <921> <922> <923>	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached document(s), on line 920. trates coordination with the Tribal government pursuant to 8(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; Compliance with Rights of way processes	Select Yes or No or	tached Document
If your of to confidemons § 54.31: <921> <922> <923> <924> <925>	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached document(s), on line 920, trates coordination with the Tribal government pursuant to I(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; Compliance with Rights of way processes Compliance with Land Use permitting requirements	Select Yes or No or	tached Document
If your of to confidemons 5 54.31: <921> <922> <923> <924> <925> <926>	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached document(s), on line 920, trates coordination with the Tribal government pursuant to Italy (a) (9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; Compliance with Rights of way processes Compliance with Land Use permitting requirements Compliance with Facilities Siting rules	Select Yes or No or	tached Document
If your of to confidemons § 54.31: <921> <922> <923> <924> <925>	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached document(s), on line 920, trates coordination with the Tribal government pursuant to I(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; Compliance with Rights of way processes Compliance with Land Use permitting requirements	Select Yes or No or	tached Document

pursuant to § 54.313(g) (Yes, No).	(1100) No Terrestrial Backhaul Reporting Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<030> Program Year <030> Contact Name - Person USAC should contact regarding this data MARK DAMMET <035> Contact Telephone Number - Number of person identified in data line <030> <030> Contact Email Address - Email Address of person identified in data line <030> regulatory@cmllongwood.com Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No). Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps	<010>	Study Area Code	589008	
<030> Contact Name - Person USAC should contact regarding this data MAYK Lammert <035> Contact Telephone Number - Number of person identified in data line <030> dozeo1011 ext. <039> Contact Email Address - Email Address of person identified in data line <030> regulatoryacs11ongwood.com Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No). Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps	<015>	Study Area Name	Telrite Corporation	
<035> Contact Telephone Number - Number of person identified in data line <030> 4072601011 ext. <039> Contact Email Address - Email Address of person identified in data line <030> regulatoryacellongwood.com Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No). Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps	<020>	Program Year	2016	
Contact Email Address - Email Address of person identified in data line <030> regulatoryscallongwood.com Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No). Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps	<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert	
Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No). Value	<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.	
pursuant to § 54.313(g) (Yes, No). **Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps	<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory@csilongwood.com	
reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps	C. P. P. M. W.	그 집 하는 나는 그는 아이를 가게 되었다면 하는 이 모든 것은 사람들이 되었다. 그는 그들은 사람들이 되었다.	a	
	<1130>	reporting carrier offers broadband service of at least 1 Mbps downstream and 256	kbps	

(1200) Terms and Condition for Lifeline Customers Lifeline Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	
<010>	Study Area Code		SARODE	
<015>	Study Area Name		Telrite Corporation	
<020>	Program Year		2016	
<030>	Contact Name - Person USAC should contact regarding this data		Nark Lammert	
<035>	Contact Telephone Number - Number of person identified in data	line <030>	4072601011 ext.	
<039>	Contact Email Address - Email Address of person identified in data	line <030>	regulatory#cailongwood.com	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans Link to Public Website	нттр 🐷	www.llfewireless.com	Name of Attached Document
or the we	heck these boxes below to confirm that the attached document(s), on line shifte listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers me			
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	1		
<1222>	Details on the number of minutes provided as part of the plan,			
<1223>	Additional charges for toll calls, and rates for each such plan.			

ata Coll	ice Cap Carrier Additional Documentation ection Form Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	- Avains
<015>	Study Area Name	Telrite Corporation
<020>	Program Year	1016
<030>	Contact Name - Person USAC should contact regarding this data	AVA LARRETE
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	requiatoryscaliongscal.com
of annual real		and a second the second
<2011a>		Name of Attached Document(s) Listing Required Information
<2012>	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a)) 2013 Frozen Support Calculation (47 CFR § 54.313(c)(1))	
<2013>	2014 Frozen Support Calculation (47 CFR § 54.313(c)(2))	
<2014>	2015 Frozen Support Calculation (47 CFR § 54.313(c)(3))	
<2015>	2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4))	
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))	4
<2016>		
<2017> <2018> <2019>	Connect America Phase II Reporting (47 CFR § \$4.313(e)) 3rd year Broadband Service Certification 5th year Broadband Service Certification	
<2020>	Please check the box to confirm that the attached document(s), on lin pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support st addresses of community anchor institutions to which began providing preceding calendar year.	hall provide the number, names, and
	bracening continues from	
<2021>	Interim Progress Community Anchor Institutions	

	ate Of Return Carrier Additional Documentation lection Form		FCC Form 481 OMB Control No. 3060-0388/OMB Control No. 5060-0819
			July 2013
<010>	Study bear finds		
<010>	Study Area Code Study Area Name	587008	
<020>	Program Year	Telrite Corporation	
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert	
<035×	Contact Telephone Number - Number of person identified in data line 4030s	4072401011 ext	
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryscsilongwood.com	
CHECK	the bases below to note compliance on its five year service quality plan (pursua CFR § 54.313(f)(2). I further certify that if	nt to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring he information reported on this form and in the documents attach	
(3010)	Progress Report on 5 Year Plan Minstone Certification (47 CFR § 54.81 N(V)11(I))	Name of Attached Document Listing Required Information	ation
(3011)	Please check this box to confirm that the attached document(s), on line § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addressoring access to broadband service in the preceding calendar year.	3012 contains the required information pursuant to esses of community anchor institutions to which began	
[3017]	Community Arichon Institutions (47 CFR § 54.913(7)(13(0))		
		Name of Attached Document Listing Required Information	
	is your cumpany a Privately Held ROB Center (47 CFR § 54.31.8(1)(2)) If yes, does your company file the RUS annual report	(Yes/No)	38
- Marian	check these boxes to confirm that the attached document(s), on line 301	To assistant the second of second property of the second by E. S.	II complian on enjoyings:
		r, contains the required information puriously to \$ 04.31307.	Companie requires.
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		
(3016)	Document(s) for Balance Sheet, Income Statement and Statement of Ca	ah Flows	
(3017)	If the response is yet on line 3014, attach your company's RUS annual report and all required documentation		
		Name of Attached Document Listing Required Information	
FR0140	if the response is no on like 3014, is your company audited?	(Yes/No) (20
thought		trading of	
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(1)(2), contains		
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a θ	ormat comparable to RUS Operating Report for Telecommunication	
[3020]	Document(s) for Balance Sheet, Income Statement and Statement of C	ash Flows	
(1021)	Management letter and audit opinion issued by the independent certified p	ublic accountant that performed the company's financial audit	
	If the response is no on line 3018, plause check the boxes below to confirm your submission, on line 3026 pursuant to § \$4.313(1)(7), contains:		_
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a formul comparable to 81/5 Operating Report for Telecommunications.		
	Borrowers,		
(1051)	Underlying information subjected to a review by an independent certified public accountant		
(3024)	Underlying information subjected to an officer certification.		
	Document(s) for Balance Sheet, Income Statement and Statement of Co.	ash Flows	
(3026)	Attach the worksheet listing required information		
		Name of Attached Document Listing Required Information	

(3000) Rate Of Raturn Carrier Additional Documentation (Continued) Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0828 July 2018
<010> Study Area Code	582008	
<015> Study Area Name	Teirite Corporation	
<d20> Program Year</d20>	2016	
<030> Contact Name - Person USAC should contact regarding this data	Mark Lanmert	
<035> Contact Telephone Number - Number of person identified in data)		
<0.19> Contact Email Address - Email Address of person identified in data	ine (010) regulatory@csilongwood.com	
Financial Data Summary		
(3027) Revenue		
(3028) Operating Expenses		
(3029) Net Income		
(3030) Telephone Plant In Service(TPIS)		
(3031) Total Assets		
(3032) Total Debt		
(3033) Total Equity		
(3034) Dividends		

Certification - Reporting Carrier Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	589008	
<015>	Study Area Name	Telrite Corporation	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.	

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

<039> Contact Email Address - Email Address of person identified in data line <030> regulatory@csilongwood.com

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Telrite Corporation Signature of Authorized Officer: CERTIFIED ONLINE Date 06/25/2015 Printed name of Authorized Officer: Kelly Jeael Title or position of Authorized Officer: 6782021294 ext. Study Area Code of Reporting Carrier: 589008 Filing Due Date for this form: 07/01/2015 Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Certification - Agent / Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0 July 2013
<010>	Study Area Code	589008
<015>	Study Area Name	Telrite Corporation
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Mark Lammert
<035>	Contact Telephone Number - Number of person identified in data line <030>	4072601011 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatory#csilongwood.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) is authorized to submit the information reported on behalf of the reportin also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the au- agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.		
Name of Authorized Agent:		
Name of Reporting Carrier:		
Signature of Authorized Officer:	Date:	
Printed name of Authorized Officer:		
Title or position of Authorized Officer:		
Telephone number of Authorized Officer:		
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	Authorized to File Annual Reports for CAF or LI Recipi	ents on Behalf of Reporting Carrier
	orized to submit the annual reports for universal service suppor reporting carrier; and, to the best of my knowledge, the informa	
Name of Reporting Carrier:		
Name of Authorized Agent or Employee of Agent:		
Signature of Authorized Agent or Employee of Agent:		Date:
Printed name of Authorized Agent or Employee of Agent:		
Title or position of Authorized Agent or Employee of Agent		
Telephone number of Authorized Agent or Employee of Ag	ent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

Attachments



FCC Form 481

Section 500 - Service Quality Standards & Consumer Protection Rules Compliance

Under FCC Rules, Section 54.202, an ETC must comply that it will satisfy applicable consumer protection and service quality standards. Telrite Corporation d/b/a Life Wireless (Telrite) is in compliance with the Cellular Telecommunications and Internet Association's Consumer Code for Wireless Service.

- Telrite discloses rates and terms of service to customers at the time service is initiated.
 These same terms and conditions are posted on Telrite's website at
 www.lifewireless.com.
- 2. Telrite provides service availability information on their website at www.lifewireless.com.
- Telrite provides contract terms to subscribers when they initiate or change service. These
 same terms are provided to subscribers during the annual recertification process as
 outlined in Commission rules that govern continued subscriber eligibility.
- 4. Telrite's Lifeline service can be terminated at any time by either party without an early termination fee. Service is dependent on continued eligibility in the program.
- Telrite provides disclosures, minutes included in Lifeline plans, expiration of rollover minutes, availability of service, and cost for additional minutes in all published Lifeline advertising materials.
- Telrite customers are provided options if they exceed the number of minutes provided in their Lifeline plan. If at any time a customer purchases additional minutes, charges and plan options are available on the company website at www.lifewireless.com.
- 7. Telrite's toll-free customer service number is 888-543-3620. Customers can also contact Telrite via email at info@lifewireless.com. This information is provided in the terms of service and on the company website and in all information provided to subscribers.
- 8. Telrite responds to all consumer inquiries and complaints received from government agencies within 30 days.
- 9. Telrite has procedures in place to maintain the privacy of subscriber proprietary information in accordance with applicable federal and state laws.
- 10. At service initiation, Telrite requests that subscribers "Opt In" to receive free notifications regarding activation status, balance alerts, etc. Customers can also decline to receive these messages and notices by "Opting Out". If a subscriber chooses to decline free notifications they will receive only those Lifeline notifications required by the FCC such as the 30-day non-usage notice, the recertification notices, etc. The customer cannot opt out of the required FCC notifications.



FCC Form 481 Section 600 - Functionality in Emergency Situations

Under FCC Rules, an ETC must demonstrate its ability to remain functional in emergency situations. Since Telrite Corporation d/b/a Life Wireless (Telrite) is providing service to its customers through the use of facilities obtained from other carriers, it is able to provide to its customers the same ability to remain functional in emergency situations as currently provided by the carriers to their own customers, including access to a reasonable amount of back-up power to ensure functionality without an external power source, re-routing traffic around damaged facilities, and the capability of managing traffic spikes resulting from emergency situations.

Telrite, along with their underlying carriers, have created back-up systems to ensure functionality in the event of a loss of power or network functionality. Telrite maintains its own diesel-powered backup generator at their switching facility in Georgia. All systems within the facility are implemented on redundant servers, each with redundant data network and power.

Telrite Corporation d|b|a Life Wireless does not have facilities in any state other than Georgia. It relies on the facilities of the underlying carrier in each state it provides service to demonstrate its own ability to function in emergency situations.

When a number is identified by a 911 dispatch center as belonging to an underlying carrier, the officer would call the underlying carrier who can assist with tracing the distressed caller or other network information. In the event further customer proprietary network information (CPNI) is needed to reach the distressed 911 caller, the underlying carrier would then direct the officer to contact the reseller, Life Wireless. All underlying carriers that Telrite utilizies have the contact number on file for Telrite d|b|a Life Wireless' customer service department.

When customer service receives a call from a 911 dispatch center, the call will be forwarded to a supervisor. The supervisor will require proof of identity generally by fax or email. After the officer and request is verified as an emergency situation, the information is released immediately. If the "officer" cannot be identified, a subpoena or court order is required.